

Swansea Bay University Health Board
Unconfirmed Minutes of the Health and Safety Committee
held on 2nd September 2019 in the Millennium Room, Health Board HQ

Present:

Maggie Berry	Independent Member (in the chair)
Reena Owen	Independent Member
Jackie Davies	Independent Member
Martyn Waygood	Interim Vice Chair

In Attendance:

Laurie Higgs	Head of Health and Safety
Sandra Husbands	Director of Public Health
Des Keighan	Assistant Director of Operations (Estates)
Hazel Robinson	Director of Workforce and Organisational Development
Gareth Howells	Director of Nursing and Patient Experience
Joanne Jones	Head of Hotel Services
Dominic Jewitt	Staffside
Liz Stauber	Interim Head of Corporate Governance
Leah Joseph	Corporate Governance Officer
Mark Parsons	Assistant Director of Health and Safety
Jacqui Maunder	Interim Head of Compliance
Steve Davies	Staffside
Nigel Hill	Staffside
Michael Imperato	Observer
Jan Worthing	Service Director, Singleton Hospital (minute 110/19)
Sian Harrop-Griffiths	Director of Strategy (minute 111/19)

Minute	Item	Action
98/19	WELCOME AND INTRODUCTIONS	
	Maggie Berry welcomed everyone to the meeting and introduced Michael Imperato, Independent Member for Cardiff and Vale Health Board.	
99/19	APOLOGIES FOR ABSENCE	
	Apologies for absence were received from Pam Wenger, Director of Corporate Governance and Chris White, Chief Operating Officer/Director of Therapies and Health Sciences, Darren Griffiths, Associate Director – Performance, Christine Morrell, Deputy Director of Therapies and Health Science.	

100/19	DECLARATIONS OF INTEREST	
	There were no new declarations of interest.	
101/19	MINUTES OF THE PREVIOUS MEETING	
	The minutes of the meeting held on 3 rd June 2019 were received and confirmed as a true and accurate record.	
102/19	MATTERS ARISING	
	<p>(i) <u>36/19 Matters Arising</u></p> <p>Des Keighan advised that the discussions with Welsh Government were continuing in relation to the monies needed for the five facet review of backlog maintenance but it needed to be funded through revenue rather than capital. He added the cost for the remainder of estate would be £225k. A paper providing an update is to be brought to December's Health and Safety meeting.</p> <p>(ii) <u>45/19 Review of Singleton Hospital Fire Safety Arrangements</u></p> <p>Mark Parsons confirmed that the most recent fire drill that took place at SBU Head Quarters was in February 2019 and drills take place every six months.</p> <p>(iii) <u>102/19 Estates and Facilities PADR Compliance</u></p> <p>Joanne Jones confirmed that she presented the facilities position at the Workforce and OD meeting. Des Keighan will present the estates position at October's Workforce meeting which details that the data of completed PADR compliance has improved. Reena Owen queried if overtime is a possibility to increase the progress of PADR completion. Hazel Robinson confirmed that Joanne Jones has highlighted the issue that the facilities department is facing and investment could be appropriate to ensure compliance is met. There is currently no uplift in estates to complete PADRs and investment could assist to maintain compliance in the future. Joanne Jones detailed that she is in the process of completing a paper which highlights requirements needed to meet standards which includes a full scenario department to department overview.</p> <p>(iv) <u>Newsletter</u></p> <p>Jacqui Maunder provided an update in respect of the health and safety newsletter. Jacqui Maunder welcomes feedback to enable distribution of the final document. The draft newsletter will be circulated requesting comments.</p>	<p>DK</p> <p>JM</p>

103/19	ACTION LOG	
	<p>The action log was received and noted with the following points raised:</p> <p>(i) <u>Action Point One</u></p> <p>Mark Parsons will provide a sample agenda for the operational group.</p>	MP
104/19	COMMITTEE WORK PROGRAMME 2019-20	
	<p>The committee's work programme for 2019-20 was received and noted with the following updates:</p> <ul style="list-style-type: none"> - Maggie Berry requests an update on food safety at December meeting. The paper to include food hygiene levels, ward hostesses and food ratings. - A presentation from the Occupational Health team at the December meeting to include how staff are supported following work related stress and violence and aggression incidents, and the type of wellness services available. 	JJ HR
105/19	HEALTH AND SAFETY RISK REGISTER	
	<p>The health and safety risk register was received.</p> <p>In discussing the report, the following points were raised:</p> <p>Laurie Higgs highlighted staff retirements will impact on resources.</p> <p>Gareth Howells commented that stability needs to be maintained and any changes made won't dismantle the work already in place. The HSE will return to Singleton in two weeks to review the situation, with an overview following in December in respect of resource.</p> <p>Mark Parsons detailed that the health board will reassess requirements and agree on a long term solution. Hazel Robinson added that the Lone Worker policy needs to be presented at the Local Partnership Forum and staffside input is needed. Gareth Howells detailed that the policy was approved by the operational group and could be ratified today, subject to it being shared with the Local Partnership Forum.</p>	
Resolved:	- The report be noted .	
106/19	HEALTH AND SAFETY TRAINING MODULES	

	<p>The health and safety modules were received.</p> <p>In discussing the report, the following points were raised:</p> <p>Laurie Higgs highlighted concerns that the high risk indicators are not being collected and only the lower levels are being measured. Numerous training logs are maintained on the Wards in paper format by Managers and on the electronic staff record (ESR). Currently there is no assurance for high risk training. Hazel Robinson confirmed that the higher level of training does not apply to all members of staff due to specific job roles. She confirmed however the modules on ESR entry level one apply to all members of staff.</p> <p>Mark Parsons commented that the latest figures in respect of the four core areas linked to health and safety are positive.</p> <p>Joanne Jones and Laurie Higgs have reviewed the portering competency skills. Joanne Jones highlighted that staff were able to choose individual competency skills to suit their roles.</p> <p>Mark Parsons commented that a cascade system would capture competency checks. The passport scheme is about the application of training and not solely the training received.</p> <p>Gareth Howells suggested that it would be good to have another update in March 2020.</p>	<p>LH</p>
<p>Resolved:</p>	<ul style="list-style-type: none"> - The report be noted. - An update to be provided in March 2020. 	<p>LH</p>
<p>107/19</p>	<p>WATER MANAGEMENT</p>	
	<p>A report outlining the water management was received.</p> <p>In introducing the report, Des Keighan highlighted the following points:</p> <ul style="list-style-type: none"> - The planned Water Safety meeting in September had to be cancelled due to the number of attendance apologies received. There is a meeting planned with the Director of Nursing and Patient Experience in November to discuss how we improve engagement with the group; - The department are looking to implement Legionella testing and are working with procurement colleagues to procure these services and are currently working with individual companies to establish this services due to difficulties with collection of samples. 	

	<ul style="list-style-type: none"> - Des Keighan will be appointed as Co-ordinating "RP" following agreement to change the roles identified within the Water Policy. A formal interview will take place at the end of December with the Authorising Engineer for Water from Shared Services. <p>In discussing the report, the following points were raised:</p> <p>Gareth Howells confirmed that this report and the Control of Substances Hazardous to Health (COSHH) gives limited assurance. The water group needs to be reinvigorated and regular updates of the work ongoing are to be brought to this meeting.</p> <p>Reena Owen detailed the need for assurance in respect of Legionella testing. Des Keighan commented that measures need to be put in place for Legionella testing, however there is a delay as laboratories are having difficulty coping with the volume of testing required.</p> <p>Martyn Waygood found the report helpful, but queried whether the importance of flushing of taps is understood on our sites. Des Keighan advised that he is satisfied within clinical areas, and in respect of non-clinical areas there is a reduced risk. Flushing however does need to take place to ensure the risk is minimised.</p> <p>Mark Parsons queried if it would be beneficial to have a meeting where one committee reviews all compliance groups. Des Keighan highlighted caution as certain committees are required by legislating groups.</p> <p>Maggie Berry requested an update regarding information following the notifications as the report was received April/ May 2019. She would have preferred an update at this meeting. Des Keighan confirmed that the central register has been updated regarding each action and it goes through the audit committee. Maggie Berry requests a full report be provided at the December meeting.</p>	<p>DK</p>
<p>Resolved:</p>	<ul style="list-style-type: none"> - The report be noted. - An update to be provided in December. 	<p>DK</p>
<p>108/19</p>	<p>HEALTH AND SAFETY PLAN</p>	
	<p>A report setting out the health and safety plan for the committee was received.</p> <p>In discussing the report, the following points were raised:</p> <p>Martyn Waygood highlighted that timescales vary across different reports. Mark Parsons confirmed that timescales do need to be changed to reflect realistic expectations, as the majority of the actions will not be completed in September 2019. He commented that once the outcome of HSE's</p>	

	<p>September visit has been announced, plans regarding structure will be fed back.</p> <p>Martyn Waygood observed that COSHH Assessments has been marked as a high priority. He queried how important is this compared to other priorities. The risk is not necessarily high day-to-day, however there is a need to review specific areas regarding substances. Gareth Howells confirmed there is limited assurance regarding the COSHH report and an update is required at December's meeting. He stated that the key component is operational care and accountability of historic gaps in the service. He commented how the information is formulated is important to ensure continuous development.</p>	MP
Resolved:	<ul style="list-style-type: none"> - The report be noted. - A COSHH report incorporating the audit recommendations be provided at December meeting. 	MP
109/19	EXTERNAL HEALTH AND SAFETY ANNUAL REPORT	
	<p>The committee's annual report for 2018-19 was received.</p> <p>In discussing the report, the following points were raised:</p> <p>Reena Owen observed that achievements are difficult to reach in recent circumstances regarding the Bridgend boundary change, however the report is good.</p> <p>Martyn Waygood is pleased with the report and queried if the report will be translated into Welsh format. Jacqui Maunder confirmed that the document will eventually will be translated.</p> <p>Laurie Higgs requires assurance in respect of fire safety and patient safety in primary care. Maggie Berry highlighted that there is no structure in some areas for walkarounds and formalised fire safety practices.</p> <p>Martyn Waygood requested that Mark Parsons rephrases 'blocked fire exit' on page 49 of the report.</p> <p>Hazel Robinson observed that in respect Prosecution Sanctions in paragraph 16.11 on page 36, it is important to input prosecutions into the paper and for the figures of prosecution to be published. Mark Parsons confirmed that he would input this information into the paper.</p>	<p>MP</p> <p>MP</p>
Resolved:	<ul style="list-style-type: none"> - The report be noted and approved with the below amendments. - The wording is rephrased on page 49 in respect of fire exits. - Figures of prosecutions to be published in this report. 	<p>MP</p> <p>MP</p>

<p>110/19</p>	<p>OPERATIONAL GROUP KEY ISSUES</p>	
	<p>A report outlining matters from the operational group was received.</p> <p>In discussing the report, the following points were raised:</p> <p>Nigel Hill voiced concerns about the fabric/ material used for uniforms for some female staff and the All Wales Policy does not address this issue. Hazel Robinson observed the importance of whether the uniform is a health risk or a personal discomfort. A cotton uniform may be easier to wear.</p> <p>Reena Owen queried how staff are able to understand policy changes. Mark Parsons confirmed that the governance structure would cascade it to the committee structure and then staff would receive it via delivery units. The newsletter would also be circulated to ensure changes are highlighted to staff.</p> <p>Appendix 1, Health and Safety Terms of Reference. Jacqui Maunder detailed that the escalation process has been updated to the document and the document has been through various groups. She added that once the final version of the document is completed, it will be circulated for approval.</p> <p>Appendix 2 and 2.1, Managing Contractors policy and Equality Impact Assessments. Steve Davies queried how contractor accidents are captured. Des Keighan confirmed that if the accident occurs in one of our areas, then a Datix incident is completed. He advised that the management company for Neath Port Talbot Hospital invite him to their internal monthly meeting and he reports back to the service managers and the health and safety operational group with information. Further discussions to be taken outside of this meeting.</p> <p>Nigel Hill mentioned that drilling work had taken place in Singleton. Jan Worthing confirmed that no drilling into Singleton walls has taken place. Estates are in control of the decoration work and Tesco have provided furniture for care of the elderly wards. Des Keighan advised that the estates department have a set procedure to follow. There have been incidents around isolation in respect of health and safety, however this is not a failure in the system.</p> <p>Hazel Robinson recommends the wording on page 5 is changed from 'employed' to 'engaged'. <i>Is an individual company or external organisation who is not an employee engaged to carry out work or provide services.</i></p> <p>Martyn Waygood observed the main criticism is the management of contractors. He would like to review processes with colleagues in Cardiff and Vale to ensure policies are followed. Michael Imperato took colleagues through an historic incident which led to a contractor policy review.</p>	<p>JM</p>

	<p>Appendix 3 and 3.1, Lone Working Policy. Michael Imperato observed that managers should be completing risk assessments and ensuring processes are in place. He demonstrated a safety device which staff can use to strengthen their safety. Martyn Waygood commented that when these were implemented in Cardiff and Vale, staff were initially concerned that they were being tracked. Once staff received explanations as to how the device could assist to provide a safety element, usability increased by 80%. Staff were provided with assurance that they were not being tracked. Maggie Berry commented that conversations relating to requirements, options and costs for this type of device need to go through the operational group. This policy is to go through the Local Partnership Forum for assurance.</p> <p>Appendix 4 and 4.1, Management of Violence and Aggression Policy. Hazel Robinson observed a bolder statement is needed in respect of court proceedings when violence and aggression is towards members of staff. Laurie Higgs highlighted that a document is available which details processes for community and hospitals when violence and aggression takes place. Maggie Berry requested that this document is brought to the operational group for review. Dominic Jewitt raised concerns on how the policy covers staff being violent towards patients. Hazel Robinson continued that this needs to be detailed in the Workforce and OD policy and not the violence and aggression policy. Gareth Howells concurred. Hazel Robinson stated that an independent Investigating Officer was in post to minimise timescales of how long staff are suspended.</p> <p>Appendix 5 and 5.1, Ligature Points Policy. Mark Parsons confirmed the policy is assessed patient by patient. He will ensure work is carried out on this document including diagrams.</p> <p>Appendix 6 and 6.1, Incident Reporting Procedure. Steve Davies highlighted that safety reports can be investigated quickly when the team is updated in a timely manner.</p> <p>Appendix 7 and 7.1, Asbestos Management Policy. No comments.</p>	
<p>Resolved:</p>	<ul style="list-style-type: none"> - The report be noted. - Health and Safety Terms of Reference ratified. The final terms of reference to be circulated. - Managing Contractors policy and Equality Impact Assessments ratified once amendments in place. - Lone Working Policy ratified and to go through Local Partnership Forum for assurance. - Management of Violence and Aggression Policy ratified. - Ligature Points Policy ratified once amendments in place. 	<p>LJ</p>

	<ul style="list-style-type: none"> - Incident Reporting Procedure ratified. - Asbestos Management Policy ratified. 	
<p>111/19</p>	<p>REVIEW OF SERVICE DELIVERY UNIT: SINGLETON HOSPITAL</p>	
	<p>Maggie Berry welcomed Jan Worthing to the meeting. A report reviewing Singleton Hospital was received.</p> <p>In introducing the report, Jan Worthing highlighted the following points:</p> <ul style="list-style-type: none"> - A Singleton Health and Safety group includes details of areas such as sharps, falls and pressure ulcers. - Scrutiny Panels for falls and pressure ulcers are in place and reviews happen case by case. - In Quarter 1, 9 sharps incidents have been recorded. Violence and aggression cases have reduced to 13 and 2 RIDDOR cases have also been reported. - There is no current security at Singleton Hospital, and not evidenced as required at this time. This is under regular review. - A robust service for safety alerts is in place with service managers updated daily. - The Ward 12 fire that took place on 26th March 2019 found that fire plans were in place and adhered to. Patients, staff and the public were made safe and there were no casualties. The site worked well with the fire service and a review is due shortly to highlight the lessons learnt. - Training is being rolled out in respect of violence and aggression following the HSE notices. - Another HSE notice detailed manual handling techniques in theatres, focusing on bariatric and pregnant patients. - Contractors working on the site are a risk. <p>In discussing the report, the following points were raised:</p> <p>Jackie Davies noted the pressure ulcer data, and reminded the committee of the Andrews report at Princess of Wales Hospital which focused on nursing record keeping. Jan Worthing observed that there is always room for improvement. KPI weekly meetings are held with both nursing and medics which review rostering, documentation and pressure ulcers,</p> <p>Joanne Jones raised her concerns in regards to the car park. Contractors are utilising the car park. She commented that the site is approximately 275 places too short and a Datix incident report is expected to be completed. She also detailed that there are new car parking staff in post</p>	

	<p>who are challenging visitors who do not park in the designated areas. Jan Worthing stated that the site does have planning permission for more spaces, however work cannot begin due to birds migrating in this area.</p> <p>Martyn Waygood queried if the pressure ulcer reduction is due to lessons learnt being applied. Jan Worthing confirmed yes, due to the amount of education that has been supplied to Wards. She also informed the committee that the purchase of falls equipment has assisted to reduce the number of falls. Jan Worthing detailed that there is ongoing education in respect of sharp incidents.</p> <p>Martyn Waygood detailed his recent visit to the estates department at Singleton Hospital where he noted contractors leaving their waste material on site after vacating. He commented that contractors need to remove their waste. Jan Worthing agreed and ensured this is now monitored and removed. Mark Parsons highlighted that a retention project is in place with contractors and payment could be held back if waste is not appropriately removed.</p> <p>Jan Worthing informed the committee that dementia training is ongoing, which will assist when dealing with violent patients who have dementia. As dementia violence is Ward related, security wouldn't be involved. She noted that staff do feel secure when security presence is on site. Jan Worthing noted that contractors are mainly based outside of the building. If they are working inside, it is in a non-clinical area, or a clinical area which has been sealed off.</p>	
Resolved:	The report be noted and accepted .	
112/19	ITEMS TO REFER TO OTHER COMMITTEES	
	These were discussed throughout the agenda.	
113/19	ANY OTHER BUSINESS	
	Des Keighan highlighted concerns that there is a national issue with incinerating clinical waste. A temporary solution may be to store the waste on the site, which would affect car parking. A paper has been presented to the First Minister. The meeting was closed.	DK
114/19	DATE OF NEXT MEETING	
	The next scheduled meeting was 2 nd December 2019.	

